Image# 12972489478 PAGE 1 / 14

FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

TORIW 3X	For Other	Than An Auth	orized Committe	ee		Office Use Only	
1. NAME OF	TYPE OR P	RINT ▼	Example: If typir	ng, type	12FE4M5	Since Ode Only	
COMMITTEE (in fu	ill)		over the lines.		121 11113		
SOCIETY OF THE	HORACIC SUR	GEONS POL	ITICAL ACTIO	ON COMM	/ITTEE		
ADDRESS (number and							
Check if different							
than previously reported. (ACC		GTON			DC	20001-6704	-
2. FEC IDENTIFICA	TION NUMBER ▼	CITY		5	STATE A	ZIP CO	DE 🛦
C C00325936		3. IS RE		IEW N) OR	AM (A)	IENDED	
4. TYPE OF REPO (Choose One)	Repo	ort	20 (M2)	May 20 (M5)	Aug	20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Repo	Due orts:		20 (M3)	lun 20 (M6)	Sep	20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15		Apr 2	0 (M4)	lul 20 (M7)	X Oct 2	20 (M10)	Jan 31 (YE)
Quarterly I July 15	Report (Q1) (c)	12-Day PRE-Election	Primary (12P)	General ((12G)	Runoff (12R)
Quarterly I		Report for the:	Convention (12C)	Special (12S)	
Quarterly I	Report (Q3)		M M /	D D /	Y . Y . Y . Y	in the	
	Report (YE)	Election	on			State of	of
July 31 Mi Report (No Year Only)	on-election) (MY)	30-Day POST-Election Report for the:	General (300	a)	Runoff (3	0R)	Special (30S)
Termination (TER)	n Report	Election	on M M /	D = D /	Y = Y = Y	in the State o	of
5. Covering Period	09 / O1	2012	through	M M M	/ D D /	2012	
I certify that I have exa	mined this Report ar	nd to the best of r	ny knowledge and b	pelief it is true	e, correct and	d complete.	
Type or Print Name of	Treasurer Dr. Sidne	y Levitsky					
Signature of Treasurer	Dr. Sidney Levitsky		[Electronically	Filed] D	ate 10	/ 10 /	2012
NOTE: Submission of fal	se, erroneous, or inco	mplete_information	may subject the pers	son signing th	is Report to th	ne penalties of 2	U.S.C. §437g.
Office Use						FEC FOR Rev. 12/2	
Only						1100. 12/2	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS
FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Page 2

	SOCIETY OF THORACIC SURGE	ONS POLITICAL ACTION COMMI	TTEE
F	Report Covering the Period: From:	09 01 / 2012 To:	09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2012		102788.42
	(b) Cash on Hand at Beginning of Reporting Period	95431.07	
	(c) Total Receipts (from Line 19)	9280.00	78859.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	104711.07	181647.42
7.	Total Disbursements (from Line 31)	10835.80	87772.15
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	93875.27	93875.27
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

×

10. Debts and Obligations Owed **BY** the Committee (Itemize all on

Schedule C and/or Schedule D)

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

0.00

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Cor	ntributions (other than loans) From:	Total Tills I Gliou	Jaionaa Tear-to-Date
(a)	Individuals/Persons Other		
	Than Political Committees	0.400.00	72030.00
	(i) Itemized (use Schedule A)	8480.00	72030.00
	(ii) Unitemized	800.00	6829.00
	(iii) TOTAL (add	3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3	
	Lines 11(a)(i) and (ii)▶	9280.00	78859.00
(1.)	Balliford Bart Occupation	0.00	0.00
(b)	Political Party Committees Other Political Committees	0.00	7 7 7
(c)	(such as PACs)	0.00	0.00
(d)	Total Contributions (add Lines		
` /	11(a)(iii), (b), and (c)) (Carry		
	Totals to Line 33, page 5)▶	9280.00	78859.00
	nsfers From Affiliated/Other		
Par	ty Committees	0.00	0.00
12 AII	Loans Received	0.00	0.00
IS. All	Loans neceived	7 7 7	
14 I oa	an Repayments Received	0.00	0.00
	sets To Operating Expenditures		7
	efunds, Rebates, etc.)		
(Ca	arry Totals to Line 37, page 5)	0.00	0.00
	funds of Contributions Made	,	,
	Federal Candidates and Other	0.00	0.00
	itical Committees er Federal Receipts	0.00	0.00
	vidends, Interest, etc.)	0.00	0.00
	nsfers from Non-Federal and Levin Funds	0.00	3.55
	Non-Federal Account		
	(from Schedule H3)	0.00	0.00
(b)	Levin Funds (from Schedule H5)	0.00	0.00
(c)	Total Transfers (add 18(a) and 18(b))	0.00	0.00
19. Tota	al Receipts (add Lines 11(d),		
	13, 14, 15, 16, 17, and 18(c))▶	9280.00	78859.00
· ,	, , -, -, , ,		
20. Tota	al Federal Receipts		
(sul	btract Line 18(c) from Line 19)▶	9280.00	78859.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal		Valvildai 16ai-10-Date
Activity (from Schedule H4)		0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		
Expenditures	835.80	4772.15
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	835.80	4772.15
Transfers to Affiliated/Other Party	3333	
Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	10000.00	83000.00
Independent Expenditures	0.00	0.00
(use Schedule E) Coordinated Party Expenditures	0.00	0.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans MadeRefunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	0.00	0.00
(add Lines 20(a), (b), and (c))	7	
Other Disbursements	0.00	0.00
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
(i) I oderar oriare		
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	10835.80	87772.15
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	10835.80	87772.15

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	9280.00	78859.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9280.00	78859.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	835.80	4772.15
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	835.80	4772.15

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR	PAGE	6	OF	14			
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X	11a	11c	12				
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC SU	JRGEONS POLITICAL ACTION CO	PMMITTEE
Full Name (Last, First, Middle Initial) Dr. William A. Baumgartner Mailing Address 600 North Wolfe Street		Date of Receipt
City Baltimore	State Zip Code MD 21287	09 13 2012 Transaction ID : SA11AI.11234
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer Johns Hopkins University Receipt For:	Occupation Physician	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Terence P. Downing Mailing Address 2100 Nebraska Avenue		Date of Receipt
City Fort Pierce	State Zip Code FL 34950	Transaction ID : SA11AI.11235 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Lawnwood CV Surgery	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Thomas E. Gaines		Date of Receipt
Mailing Address 1940 Alcoa Highway	Ctata 7in Coda	09 13 2012
City Knoxville	State Zip Code TN 37920	Transaction ID : SA11AI.11238 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer University Health Systems	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	2250.00
TOTAL This Period (last page this line num	per only)	

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using th	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC SUF	RGEONS POLITICAL ACTION CO	MMITTEE
Full Name (Last, First, Middle Initial) 1. Dr. Mark T. Grattan		Date of Receipt
Mailing Address 609 Ahakea Street		09 13 2012
City	State Zip Code	Transaction ID : SA11AI.11239
Honolulu	HI 96816	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Self	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) 3. Dr. Walter H. Halloran		Date of Receipt
Mailing Address 500 Arcade Avenue		09 17 2012
City	State Zip Code	Transaction ID : SA11AI.11223
Elkhart	IN 46514	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	
Elkhart General Hospital	Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Dr. John J. Lamberti		Date of Receipt
Mailing Address 1896 West Montecito		09 17 _ 2012 _
City	State Zip Code	Transaction ID : SA11AI.11224
San Diego	CA 92103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	
University of California	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	·····	1000.00
TOTAL This Period (last page this line number	· ·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LIN	PAGE	8	OF	14			
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or for commercial purposes, other than using	g the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC S	URGEONS POLITICAL ACTION CO	DMMITTEE
Full Name (Last, First, Middle Initial) Dr. Alex G. Little Mailing Address 9731 North Horizon Vista	Plaza	Date of Receipt
City	State Zip Code	09 13 2012 Transaction ID : SA11AI.11242
Tuscon FEC ID number of contributing federal political committee.	AZ 85704	Amount of Each Receipt this Period 250.00
Name of Employer Self	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) 3. Dr. Alex G. Little Mailing Address 9731 North Horizon Vista	Plaza	Date of Receipt M M M / D D / Y T Y T Y T Y T Y T Y T Y T Y T Y T Y
City Tuscon	State Zip Code AZ 85704	Transaction ID : SA11AI.11253 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Self	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Charles J. Lutz		Date of Receipt
Mailing Address 104 Union Avenue		09 13 2012
City Syracuse	State Zip Code NY 13103	Transaction ID : SA11AI.11243 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Cardiac Surgery Associates Receipt For:	Occupation Physician Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional	ıl) >	750.00
TOTAL This Period (last page this line num	aber only)	

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR I	PAGE	9	OF	14			
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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC SUI	RGEONS POLITICAL ACTION CO	MMITTEE		
Full Name (Last, First, Middle Initial) 1. Dr. Patrick M. McCarthy		Date of Receipt		
Mailing Address 1430 Edgewood Lane	Mailing Address 1430 Edgewood Lane			
City	State Zip Code	09 17 2012 Transaction ID : SA11AI.11225		
Winnetka	IL 60093	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	1500.00		
Name of Employer	Occupation			
Northwestern Memorial Hospital	Physician			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	1500.00			
Full Name (Last, First, Middle Initial) 3. Dr. Edwin C. McGee		Date of Receipt		
Mailing Address 540 Fair Oaks Avenue	Mailing Address 540 Fair Oaks Avenue			
City	State Zip Code	Transaction ID : SA11AI.11226		
Oak Park	IL 60302	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	250.00		
Name of Employer	Occupation			
Northwestern Memorial Hospital	Physician			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Dr. Kevin B. Miller		Date of Receipt		
Mailing Address 1960 Ogden Street		09 13 2012		
City	State Zip Code	Transaction ID : SA11AI.11244		
Denver	CO 80218	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	1000.00		
Name of Employer	Name of Employer Occupation			
Exempla Physician Network	Physician			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	1000.00			
SUBTOTAL of Receipts This Page (optional)		2750.00		
TOTAL This Period (last page this line number	r only)			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

	_	LINE	_		:	PAGE	. ′	10	OF	14
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC SUR	RGEONS POLITICAL ACTION CO	MMITTEE		
Full Name (Last, First, Middle Initial) 1. Dr. Ronald L. Pohl		Date of Receipt		
Mailing Address 4452 Indian Hill Drive	Mailing Address 4452 Indian Hill Drive			
City	State Zip Code	09 17 2012 Transaction ID : SA11AI.11229		
Lima	OH 45806	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	500.00		
Name of Employer	Occupation			
Ohio CT&V Surgeons	Physician			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	500.00			
Full Name (Last, First, Middle Initial) Dr. Lawrence M. Wei		Date of Receipt		
Mailing Address 200 Lothrop Street	Mailing Address 200 Lothrop Street			
City	State Zip Code	Transaction ID : SA11AI.11248		
Pittsburgh	PA 15213	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	730.00		
Name of Employer	Occupation			
University of Pittsburgh	Physician			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 730.00			
Full Name (Last, First, Middle Initial) Dr. Randall K. Wolf		Date of Receipt		
Mailing Address 26747 Bell Arbor Road		09 17 2012		
City West Harrison	State Zip Code IN 47060	Transaction ID : SA11AI.11232 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	500.00		
Name of Employer	Occupation			
Community Health Network	Physician			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	500.00			
SUBTOTAL of Receipts This Page (optional)		1730.00		
TOTAL This Period (last page this line numbe	r only)	8480.00		

S ľ

S	CHEDULE B (FEC Form 3X)	11-		FOR I	LINE I	NUMBER:			PAGE	11	OF 14
IT	EMIZED DISBURSEMENTS		ite schedule(s) itegory of the	1 `	k only 21b	′	23		24 [25	06
			immary Page		210	22 28a	23 28b		24 28c	25	26 30b
Ar	ny information copied from such Reports and Staten	nents may no	t be sold or use	ed by anv							
	for commercial purposes, other than using the name										
$\left \right\rangle$	NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC SURGE	ONS POI	LITICAL AC	CTION	COI	ммітт	EE				
<u>/_</u>	Full Name (Last, First, Middle Initial)										
Α.	American Express						f Disburs	ement			
	Mailing Address P.O. Box 53852					09	/ D	05		2012	Y
	City		Zip Code			Trono	action ID	. ep	01 D 11	24.4	
	Phoenix Purpose of Disbursement	AZ	85072			IIalis	action it	. 362	216.11	214	
	Credit Card Fees			· · ·		Amoun	t of Each	Disbu	ırseme	nt this	Period
	Candidate Name			Categor	v/			_	-	7.	2.64
	200			Туре			7		7	/	9.64
	Office Sought: House Disbursen Senate	nent For: Primary	General								
	President	Other (specify	y) \								
_	State: District:										
D	Full Name (Last, First, Middle Initial)					Doto of	f Disburs	omont			
υ.	Authorize.Net					M M	_	D /		Y	V
	Mailing Address P.O. Box 8999					09		05		2012	
	City San Francisco		Zip Code 94128			Trans	action II) : SB	21B.11	213	
	Purpose of Disbursement Credit Card Fees			· · ·	\exists	Amoun	t of Each	Disbu	ırseme	nt this	Period
	Candidate Name			Categor Type	y/	Γ.				2	6.36
	Office Sought: House Disbursen	nent For:		1900			7		,		
		Primary	General								
	President State: District:	Other (specify	√) ▼								
	Full Name (Last, First, Middle Initial)				+						
C.	Merchant Services					Date of	f Disburs	ement			
						M M	/ D			ΥΙΥ	Υ
	Mailing Address 7300 Chapman Highway					09		04		2012	
	,		Zip Code			Trans	action ID	· SB:	21B.11	212	
	Knoxville TN 37920 Purpose of Disbursement					Truit.		. 02.			
	Credit Card Fees				Amount of Each Disbursemen			nt this	Period		
	Candidate Name	Category/ Type						1.46			
	Office Sought: House Disbursen						- 7		,		
		Primary	General								
	State: President State:	Other (specify	y) ▼								
Г	District.										
s	SUBTOTAL of Disbursements This Page (optional)				•				,	597	7.46
T.	OTAL This Davied (last name this Pass name to 1)								-		
L^1	OTAL This Period (last page this line number only)						-		7		

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SC	CHEDULE B (FEC Form 3X)			DAGE 40 CE	1.4			
	· ·	Use separate schedule(s) FOR LINE		14			
ΙΤΙ	EMIZED DISBURSEMENTS	for each category of the	(Orlook Orliy		1.06			
		Detailed Summary Page	X 21b	22 23 24 25	26			
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	y information copied from such Reports and Staten				6			
or	for commercial purposes, other than using the nam	ne and address of any polit	ical committee to	solicit contributions from such committee.				
\setminus	NAME OF COMMITTEE (In Full)							
$ \rangle$	SOCIETY OF THORACIC SURGE	ONS POLITICAL A	CTION CO					
/	SOCIETY OF THORACIC SORGE	ONO I OLITICAL A	CHON CO					
	Full Name (Last, First, Middle Initial)							
_	Merchant Services			Date of Disbursement				
<i>,</i>	Merchant Services							
	Mailing Address 7300 Chapman Highway			09 10 2012				
	Mailing Address 7300 Chapman Highway			09 10 2012				
	City	State Zip Code						
	Knoxville	TN 37920		Transaction ID : SB21B.11211				
	Purpose of Disbursement	3/920						
	Credit Card Fees			Amount of Each Disbursement this Perio	, d			
				Amount of Each Disbursement this Penc	ou			
	Candidate Name		Category/	81.32				
			Туре	31.02				
	Office Sought: House Disbursen	nent For:						
		Primary General						
	President	Other (specify) ▼						
	State: District:							
	Full Name (Last, First, Middle Initial)							
В.	SunTrust			Date of Disbursement				
	Carridot			M = M / D = D / Y = Y = Y				
	Mailing Address 3440 Wisconsin Avenue, NW		09 21 2012					
	g vivial or to viloonom vivonao, tvv							
	City 5	State Zip Code						
	Washington	DC 20016		Transaction ID : SB21B.11255				
	Purpose of Disbursement							
	Bank Charges			Amount of Each Disbursement this Period	od			
	Candidate Name		Category/					
			Type	157.02				
	Office Sought: House Disbursen	nent For:	71	,				
		Primary General						
	President	Other (specify)						
	State: District:	Carior (opcony)						
_								
_	Full Name (Last, First, Middle Initial)			Data of Dishamanant				
C.				Date of Disbursement				
				M M / D D / Y Y Y Y				
	Mailing Address							
	City	State Zip Code						
	Purpose of Disbursement							
				Amount of Each Disbursement this Period	od			
	Candidate Name		Category/					
		Type						
	Office Sought: House Disbursen	nent For:						
	Senate	Primary General						
	President	Other (specify) ▼						
	State: District:	·						
	l l		l		_			
، ا	UBTOTAL of Disbursements This Page (optional)			238.34				
டீ	ODITION DISDUISEMENTS THIS FAGE (OPHOHAI)		·····					
_	OTAL This Period (last page this line number only)		_	835.80				

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 24 25 26 28a 28b 28c 29 30b			
Any information copied from such Reports and Stat or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC SURG						
Full Name (Last, First, Middle Initial)			Data of Bishamana			
A. DEMOCRATIC CONGRESSIONA Mailing Address 430 SOUTH CAPITOL STREET,		MIIIEE	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City	State Zip Code					
WASHINGTON	DC 20003		Transaction ID : SB23.11221			
Purpose of Disbursement CONTRIBUTION			Amount of Each Disbursement this Period			
Candidate Name		Category/ Type	1500.00			
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)	Туре				
Full Name (Last, First, Middle Initial) B. FRIENDS OF CAROLYN MCCAF	OTUN		Date of Disbursement			
B. FRIENDS OF CAROLYN MCCAF	KIHY		Man / Dabursement			
Mailing Address 151 LINDEN ROAD	Mailing Address 151 LINDEN ROAD					
City MINEOLA	State Zip Code NY 11501		Transaction ID : SB23.11218			
Purpose of Disbursement CONTRIBUTION			Amount of Each Disbursement this Period			
Candidate Name CAROLYN MCCARTHY		Category/ Type	1000.00			
	ement For: 2012	Турс				
Senate President State: NY District: 04	Primary					
Full Name (Last, First, Middle Initial) C. FRIENDS OF JOE PITTS			Date of Disbursement			
Mailing Address P.O. BOX 775		09 18 2012				
City UNIONVILLE						
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period				
Candidate Name JOSEPH R. PITTS	Category/ Type	1500.00				
	ement For: 2012 Primary	1,900				
SUBTOTAL of Disbursements This Page (optional)		······	4000.00			
TOTAL This Period (last page this line number onl	y)	·····				

SCHEDULE B (FEC Form 3X)	11	FOR LINE I	NUMBER:	PAGE 14 OF 14	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 28a 28b	24 25 26 28c 29 30	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC SURGE				Suori soriiiiiiiiiioo.	
Full Name (Last, First, Middle Initial)			Data of Diahuwas	unt .	
A. FRIENDS OF JOHN BARRASSO			Date of Disburseme	ent	
Mailing Address P.O. BOX 52008			09 18	2012	
,	State Zip Code WY 82605		Transaction ID : S	B23.11216	
Purpose of Disbursement	WY 82605				
CONTRIBUTION			Amount of Each Dis	sbursement this Period	
Candidate Name JOHN A. BARRASSO		Category/ Type		2500.00	
Office Sought: House Disbursem	nent For: 2012 Primary General Other (specify)	Туре		, , , , ,	
Full Name (Last, First, Middle Initial)					
B. PETE STARK RE-ELECTION CON		Date of Disburseme			
Mailing Address P.O. BOX 8331			09 / 18	2012	
FREMONT	State Zip Code CA 94537		Transaction ID : S	SB23.11220	
Purpose of Disbursement CONTRIBUTION			Amount of Each Dis	sbursement this Period	
Candidate Name FORTNEY P. STARK		Category/		1000.00	
Office Sought: House Disbursem	nent For: 2012 Primary	Туре			
Full Name (Last, First, Middle Initial) - SCOTT BROWN FOR US SENATE	COMMITTEE		Date of Disburseme		
Mailing Address 337 SUMMER STREET		09 18	2012		
BOSTON	State Zip Code MA 02210		Transaction ID : S	BB23.11217	
Purpose of Disbursement CONTRIBUTION	Purpose of Disbursement				
Candidate Name SCOTT P. BROWN	Category/ Type	Amount of Each bis	sbursement this Period 2500.00		
Office Sought: House Disbursem Senate President	nent For: 2012 Primary General Other (specify)	туре		7	
State: MA District: 00					
SUBTOTAL of Disbursements This Page (optional)		············		6000.00	
TOTAL This Period (last page this line number only).				10000.00	